Despite fierce competition for grant dollars, I’m excited to say that our research program once again outperformed many of our peers. Last year I told you we were seventh in the nation among peer departments of internal medicine despite a period of reduced federal spending for research. In 2008, though federal budgets shrank further, we moved from seventh to fourth nationally in National Institutes of Health (NIH) funding compared to our peers. And within the Medical School, Internal Medicine again garnered the lion’s share—$122 million of the school’s total $301 million in funding.

Funding is significant for a number of reasons. Clearly, it provides an infusion of money, the importance of which, to the field of research, can’t be overstated—especially in today’s economy. It also brings much deserved recognition to the faculty members who worked so hard to secure those grants. Another important outcome is the recognition that comes to our program, to the University and the Health System. It is this reputation that helped us attract a 25-member team of heart rhythm researchers from New York State last year to form the University of Michigan Center for Arrhythmia Research. You can read more about the groundbreaking work being done at the center in the Cardiovascular Medicine section of this report.

With the division of research into two distinct programs, basic and translational falling under my auspices, and clinical research, headed by Anna Lok, MBBS, 2008 gave me an opportunity to focus more of my energies on the formal mentoring program we implemented for junior faculty last year. I’m happy to report that we continue to make strong progress there. This is just one of the ways we have found to continue to invest in retaining our scientists. The competition for our best and brightest researchers is intense. We have a strong cadre of young physician scientists coming up, too. And it is both exciting and humbling to consider the potential that lays ahead for our program. We’re not just doing research for the sake of doing research; we’re trying to optimize therapies that will positively change our current—and future—patients’ lives.

Our success securing outside grant funding combined with the caliber of our people positions us well to take advantage of the recent stimulus monies allocated to the NIH. Unfortunately the two-year limit on these funds will challenge our ability to maintain our research momentum in the long term. Developing truly outstanding world-class programs requires cutting-edge research with a 10- to 20-year vision and extensive resources to build the infrastructure that will seed new treatments and optimal therapies. Our continuing struggle, however, remains: providing consistent resources for our scientists so that we can carry them through these uncertain times.

And so we end one year and head into another with cautious optimism. Our scientists will likely experience increased pressure without an infusion of resources across the board—funding along with adequate space for their research—and we will continue to seek both. The physician-scientist is an endangered species that is crucial for our ability to translate basic science research into new clinical treatments. We had another outstanding year of success in 2008. Our challenge is to keep the momentum going.